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PATENT

Attorney Docket No.: UM-08719

22390 U.S.P.T.O.
10/761557

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Mail Stop Patent Application
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of D. James Surmeier, Tatiana Tkatch and Gytis Baranauskas for **Manipulation of Neuronal Ion Channels**.

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein are being deposited with the U.S. Postal Service on this date, **January 21, 2004**, in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number **EL 992 783 907 US**, addressed to: **Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450**.

Susan M. McClintock

1. Type Of Application

This new application is for a(n)

Original (nonprovisional)

2. Papers Enclosed That Are Required For Filing Date Under 37 C.F.R. § 1.53(b) (Regular) or 37 C.F.R. § 1.153

(Design) Application

71 Pages of Specification

2 Pages of Claims

1 Page of Abstract

0 Sheets of Informal Drawings

3. Declaration

Enclosed

Unexecuted.

4. Inventorship Statement

The inventorship for all the claims in this application is:

the same

5. Language

English

6. Fee Calculation (37 C.F.R. § 1.16)

Regular application

CLAIMS AS FILED

Number Filed	Number Extra	Rate	Basic Fee - \$770.00 (37 C.F.R. § 1.16(a))
Total Claims (37 C.F.R. § 1.16(c))	20 - 20 =	0 × \$18.00 =	\$0.00
Independent Claims (37 C.F.R. § 1.16(b))	4 - 3 =	0 × \$86.00 =	\$86.00
Multiple Dependent Claim(s), if any (37 C.F.R. § 1.16(d))		+ \$290.00 =	\$0.00

Filing Fee Calculation \$856.00

7. Small Entity Statement(s)

Verified Statement(s) that this is a filing by a small entity under 37 C.F.R. §§ 1.9 and 1.27.

Filing Fee Calculation (50% of above) \$428.00

8. Fee Payment Being Made At This Time

Enclosed
 basic filing fee

Total Fees Enclosed \$428.00

\$428.00

9. Method of Payment of Fees

Check in the amount of \$428.00

10. Authorization To Charge Additional Fees and Credit Overpayment

The Commissioner is hereby authorized to charge any deficiency in the payment of the required fees, and/or credit any overpayment, to Deposit Account No.: 08-1290. An originally executed duplicate of this transmittal is enclosed for this purpose.

11. Power of Attorney by Assignee

Enclosed (unexecuted)

12. Return Receipt Postcard

Enclosed

Dated: January 21, 2004



David A. Casimir
Registration No.: 42,395

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Statement Where No Further Pages Added
 This transmittal ends with this page.